LOS ANGELES COUNTY - DEPARTMENT OF HEALTH SERVICES HARBOR-UCLA MEDICAL CENTER

${\bf COMMERCIAL\ PAYOR\ CONTRACT\ -\ COMPREHENSIVE\ BUNDLED\ SERVICES\ BY\ SERVICE\ AREA*}$

EFFECTIVE JANUARY 1, 2023 UPDATED AS OF 12/15/2022

| SHOPPABLE BUNDLED INP. (Per Diem=Per Do | | ANTHEM B (Comm | | Maximum Negotiated Rate | Minimum Negotiated Rate | |
|--|----------------|-----------------------------------|-----------------------------|-----------------------------------|-----------------------------------|--|
| Medical Services | CPT/HCPCS Code | Facility** | Professional | Facility** | Facility** | |
| CORONARY CARE UNIT - GENERAL | n/a | Lesser of Per Diem or \$23,845 | included in Per Diem rate | Lesser of Per Diem or \$23,845 | Lesser of Per Diem or \$23,845 | |
| CARDIOLOGY | n/a | Lesser of Per Diem or \$10,460 | included in Per Diem rate | Lesser of Per Diem or \$10,460 | Lesser of Per Diem or \$10,460 | |
| | 11/ 0 | Lesser of Per Diem or | | Lesser of Per Diem or | Lesser of Per Diem or | |
| FAMILY MEDICINE | n/a | \$10,460 Lesser of Per Diem or | included in Per Diem rate | \$10,460 Lesser of Per Diem or | \$10,460 Lesser of Per Diem or | |
| MEDICINE | n/a | \$10,460 | included in Per Diem rate | \$10,460 | \$10,460 | |
| NEONATOLOGY | n/a | Lesser of Per Diem or \$23,845 | included in Per Diem rate | Lesser of Per Diem or \$23,845 | Lesser of Per Diem or \$23,845 | |
| WENDON 0.00 | | Lesser of Per Diem or | | Lesser of Per Diem or | Lesser of Per Diem or | |
| NEUROLOGY | n/a | \$10,460 Lesser of Per Diem or | included in Per Diem rate | \$10,460 Lesser of Per Diem or | \$10,460 Lesser of Per Diem or | |
| PEDIATRICS | n/a | \$10,442 | included in Per Diem rate | \$10,442 | \$10,442 | |
| SURGERY - BREAST | n/a | Lesser of Per Diem or \$12,569 | included in Per Diem rate | Lesser of Per Diem or \$12,569 | Lesser of Per Diem or \$12,569 | |
| SURGERY - CARDIOTHORACIC | n/a | Lesser of Per Diem or \$12,569 | included in Per Diem rate | Lesser of Per Diem or \$12,569 | Lesser of Per Diem or \$12,569 | |
| | 11/ a | Lesser of Per Diem or | included in Fer Dielii Tate | Lesser of Per Diem or | Lesser of Per Diem or | |
| SURGERY - COLORECTAL | n/a | \$12,569 Lesser of Per Diem or | included in Per Diem rate | \$12,569 Lesser of Per Diem or | \$12,569 Lesser of Per Diem or | |
| SURGERY - GENERAL | n/a | \$12,569 | included in Per Diem rate | \$12,569 | \$12,569 | |
| SURGERY - ONCOLOGY | n/a | Lesser of Per Diem or \$12,569 | included in Per Diem rate | Lesser of Per Diem or \$12,569 | Lesser of Per Diem or \$12,569 | |
| | | Lesser of Per Diem or | | Lesser of Per Diem or | Lesser of Per Diem or | |
| SURGERY - OPHTHALMOLOGY | n/a | \$12,569 Lesser of Per Diem or | included in Per Diem rate | \$12,569 Lesser of Per Diem or | \$12,569 Lesser of Per Diem or | |
| SURGERY - ORAL & MAXILLOFACIAL | n/a | \$12,569 | included in Per Diem rate | \$12,569 | \$12,569 | |
| SURGERY - ENDOVASCULAR | n/a | Lesser of Per Diem or \$12,569 | included in Per Diem rate | Lesser of Per Diem or \$12,569 | Lesser of Per Diem or \$12,569 | |
| CLIDCEDY OTOLADVALCOLOGY | | Lesser of Per Diem or | in alcohold in Day Diagrams | Lesser of Per Diem or | Lesser of Per Diem or | |
| SURGERY - OTOLARYNGOLOGY | n/a | \$12,569 Lesser of Per Diem or | included in Per Diem rate | \$12,569 Lesser of Per Diem or | \$12,569 Lesser of Per Diem or | |
| OBSTETRICS | n/a | \$11,040 Lesser of Per Diem or | included in Per Diem rate | \$11,040 Lesser of Per Diem or | \$11,040 Lesser of Per Diem or | |
| LIMB PRESERVATION | n/a | \$10,460 | included in Per Diem rate | \$10,460 | \$10,460 | |
| SURGERY - ORTHOPEDICS | n/a | Lesser of Per Diem or \$12,569 | included in Per Diem rate | Lesser of Per Diem or \$12,569 | Lesser of Per Diem or \$12,569 | |
| | | Lesser of Per Diem or | | Lesser of Per Diem or | Lesser of Per Diem or | |
| SURGERY - PLASTIC | n/a | \$12,569 Lesser of Per Diem or | included in Per Diem rate | \$12,569 Lesser of Per Diem or | \$12,569 Lesser of Per Diem or | |
| SURGERY - UROLOGY | n/a | \$12,569 | included in Per Diem rate | \$12,569 | \$12,569 | |
| SURGERY - VASCULAR | n/a | Lesser of Per Diem or \$12,569 | included in Per Diem rate | Lesser of Per Diem or \$12,569 | Lesser of Per Diem or \$12,569 | |
| | | Lesser of Per Diem or | | Lesser of Per Diem or | Lesser of Per Diem or | |
| SURGERY - GYNECOLOGY | n/a | \$12,569 Lesser of Per Diem or | included in Per Diem rate | \$12,569 Lesser of Per Diem or | \$12,569 Lesser of Per Diem or | |
| CLINICAL RESEARCH | n/a | \$7,293 | included in Per Diem rate | \$7,293 | \$7,293 Lesser of Per Diem or | |
| GYN/Oncology | n/a | Lesser of Per Diem or \$12,569 | included in Per Diem rate | Lesser of Per Diem or \$12,569 | \$12,569 | |
| CANECOLOGA IB | /- | Lesser of Per Diem or | included in Der Diem ret- | Lesser of Per Diem or | Lesser of Per Diem or | |
| GYNECOLOGY - IP | n/a | \$12,569 Lesser of Per Diem or | included in Per Diem rate | \$12,569 Lesser of Per Diem or | \$12,569 Lesser of Per Diem or | |
| NEUROSURGERY | n/a | \$12,569 Lesser of Per Diem or | included in Per Diem rate | \$12,569 Lesser of Per Diem or | \$12,569 Lesser of Per Diem or | |
| NEWBORN | n/a | \$6,360 | included in Per Diem rate | \$6,360 | \$6,360 | |
| LEAVE OF ABSENCE - W/CHARGE | n/a | Lesser of Per Diem or \$10,460 | included in Per Diem rate | Lesser of Per Diem or \$10,460 | Lesser of Per Diem or \$10,460 | |
| · | | Lesser of Per Diem or | | Lesser of Per Diem or | Lesser of Per Diem or | |
| NURSERY - NEWBORN LEVEL IV | n/a | \$23,845 Lesser of Per Diem or | included in Per Diem rate | \$23,845 Lesser of Per Diem or | \$23,845 Lesser of Per Diem or | |
| SPECIAL CARE NURSERY | n/a | \$6,976 | included in Per Diem rate | \$6,976 | | |

LOS ANGELES COUNTY - DEPARTMENT OF HEALTH SERVICES HARBOR-UCLA MEDICAL CENTER

COMMERCIAL PAYOR CONTRACT - COMPREHENSIVE BUNDLED SERVICES BY SERVICE AREA*

EFFECTIVE JANUARY 1, 2023 UPDATED AS OF 12/15/2022

| SHOPPABLE BUNDLED IN (Per Diem=Per | | ANTHEM B (Comm | | Maximum Negotiated Rate | Minimum Negotiated Rate |
|---------------------------------------|----------------|-----------------------|---------------------------|----------------------------|----------------------------|
| Medical Services | CPT/HCPCS Code | Facility** | Professional | Facility** | Facility** |
| | | Lesser of Per Diem or | | Lesser of Per Diem or | Lesser of Per Diem or |
| NURSERY | n/a | \$6,360 | included in Per Diem rate | \$6,360 | \$6,360 |
| | | Lesser of Per Diem or | | Lesser of Per Diem or | Lesser of Per Diem or |
| STEP DOWN | n/a | \$12,205 | included in Per Diem rate | \$12,205 | \$12,205 |
| | | Lesser of Per Diem or | | Lesser of Per Diem or | Lesser of Per Diem or |
| KIDNEY/CADAVER | n/a | \$36,778 | included in Per Diem rate | \$36,778 | \$36,778 |
| | | Lesser of Per Diem or | | Lesser of Per Diem or | Lesser of Per Diem or |
| KIDNEY/LIVE | n/a | \$48,832 | included in Per Diem rate | \$48,832 | \$48,832 |

HARBOR-UCLA MEDICAL CENTER

COMMERCIAL PAYOR CONTRACT - COMPREHENSIVE BUNDLED SERVICES BY SERVICE AREA* **EFFECTIVE JANUARY 1, 2023 UPDATED AS OF 12/15/2022**

| Martic M | SHOPPABLE OUTPATIENT SERVICES | | | ANTHEM E | LUE CROSS | Maximum | Minimum |
|---|--|-------|----------|------------|-------------------|---------|---------------|
| Medical Services | | | | (Comn | nercial) | | |
| VENDOUNCTURE 38415 5 | Medical Services | | Note | Facility** | Professional | | Facility** |
| BASIC METABOLIC PANEL (CALCIUM, TOTAL) THIS PANEL BUST Soo88 S 12.35 3ee footnote *** 12.35 12.35 | COLLECTION OF VENOUS BLOOD BY | | | | | | |
| TOTALI TINIS PARIEL MUST COMPREHENSIVE METABOLIC PARIEL THIS PARIEL MUST MICHIGAN PROCESS S 15.42 see footnote*** 15.42 15.42 LIPID PARIEL THIS PARIEL MUST MICHIGAN PROCESS REVALL TURCITOR PARIEL TINIS REACHEN TORS RIBLING REVALL TURCITOR PARIEL TINIS REVALL TURCITO | VENIPUNCTURE | 36415 | Ş | 4.38 | see footnote *** | 4.38 | 4.38 |
| TOTALI TINIS PARIEL MUST COMPREHENSIVE METABOLIC PARIEL THIS PARIEL MUST MICHIGAN PROCESS S 15.42 see footnote*** 15.42 15.42 LIPID PARIEL THIS PARIEL MUST MICHIGAN PROCESS REVALL TURCITOR PARIEL TINIS REACHEN TORS RIBLING REVALL TURCITOR PARIEL TINIS REVALL TURCITO | | | | | | | |
| COMPREHENSIVE METABOLIC PANEL THIS FAMEL MUST INCLIDE T UNIFO PANEL THIS PANEL MUST MICLIDE T UNIFO PANEL THIS PANEL MUST MICLIDE THE FOLLOWING-CALOL 80001 S 19.55 SEE TO SEE | • | 90049 | ے ا | 12.25 | factuate *** | 12.25 | 12.25 |
| PANEL TIME SAMEL MUST INCLUDET 80005 \$ 15.42 see footnote *** 15.42 15.42 15.42 INCLUDE THE FOLLOWINGS CHOL 80006 \$ 19.55 see footnote *** 19.55 19. | TOTAL) THIS PANEL MUST | 80048 | | 12.35 | see rootnote **** | 12.35 | 12.35 |
| PANEL TIME SAMEL MUST INCLUDET 80005 \$ 15.42 see footnote *** 15.42 15.42 15.42 INCLUDE THE FOLLOWINGS CHOL 80006 \$ 19.55 see footnote *** 19.55 19. | COMPREHENSIVE METAROLIC | | | | | | |
| INDID PARKET HIST PARKET MINTST NANCLUMET HER FORLOW 80065 \$ 19.55 1 | | 80053 | | 15.42 | see footnote *** | 15.42 | 15 <i>4</i> 2 |
| NACLUDE THE FOLLOWING: CHOL 80061 \$ 19.55 see footnote *** 19.55 19.55 | | 55555 | · · | | 500 1000 | 20112 | 251.12 |
| RENAL FUNCTION PARIEL THIS PANEL MUST INCLUDE THE FOLLOW REPATIC FUNCTION PARIEL THIS PANEL MUST INCLUDE THE FOLLOW REPATIC FUNCTION PARIEL THIS PANEL MUST INCLUDE THE FOLL REPATIC FUNCTION PARIEL THIS PANEL MUST INCLUDE THE FOLL REPATIC FUNCTION PARIEL THIS PANEL MUST INCLUDE THE FOLL REPATIC FUNCTION PARIEL THIS REAGEN'F FOR BILLIUBI | | 80061 | 9 | 19.55 | see footnote *** | 19.55 | 19.55 |
| PANEL MUST INCLUDE THE FOLILOW HEAPATE FUNCTION PANEL THIS PANEL MUST INCLUDE THE FOLIL USIN MUST INCLUDE THE FOLIT USIN MUST INCLUDE THE FOLIC USIN MUST INCLUDE THE FOLIC USIN MUST INCLUDE THE FOLIC USIN MUST INCLUDE THE FOLIL USIN MUST INCLUDE THE FOLIC USIN MUST INCLUDE THE FOLI | | | | | | | |
| | RENAL FUNCTION PANEL THIS | | | | | | |
| PANEL NUST INCLUDE THE FOLL | PANEL MUST INCLUDE THE FOLLOW | 80069 | Ş | 12.67 | see footnote *** | 12.67 | 12.67 |
| SERICATIVE SERIOR | | | | | | | |
| REACENT FOR BURNUBL REACENT FOR BURNUBLS RECENTARY REACENT FOR BURNUBLS REACENT FOR BURNUBLS REACENT FOR | | 80076 | Ş | 11.93 | see footnote *** | 11.93 | 11.93 |
| URINALYSIS, BY DIP STOCK OR TABLET REAGENT FOR BILINUBI 81001 \$ 4.63 | , and the second | 04000 | | | · | | |
| REAGENT FOR BILINUBI URINALYSIS, BY DE STICK OR TABLET REAGENT FOR BUILINUBI REAGENT FOR | | 81000 | Ş | 5.87 | see footnote *** | 5.87 | 5.87 |
| URINATYSIS, BY DIP STICK OR TABLET REAGENT FOR BURNUB 81002 \$ 5.08 \$ see footnote *** 5.08 \$ | ' | 91001 | | 4.63 | soo footnoto *** | 4.62 | 4.62 |
| REAGENT FOR BUILBUILD | | 81001 | | 4.03 | see roothote *** | 4.03 | 4.03 |
| REAGENT FOR BILLIUBII 81003 \$ 3.29 see footnote *** 3.29 3.2 | • | 81002 | | 5.08 | see footnote *** | 5.08 | 5.08 |
| REAGENT FOR BILIPUBI 81003 \$ 3.29 see footnote *** 3.29 3.29 ALBUMIN; URINE (EG. MICROALBUMIN), QUANTITATIVE 82043 \$ 8.44 see footnote *** 8.44 8.44 8.44 ALGALABUMIN; URINE (EG. MICROALBUMIN), QUANTITATIVE 82043 \$ 8.44 see footnote *** 8.44 8.44 ALGALABUMIN; URINE (EG. MICROALBUMIN), QUANTITATIVE 82045 \$ 8.45 see footnote *** 18.83 18.83 SPECTROSCOPY 82365 \$ 18.83 see footnote *** 6.77 6.77 GASES, BLOOD, ANY COMBINATION OF PH, PCO2, PO2, CO2, Inc 82803 \$ 38.06 see footnote *** 38.06 38.06 HEMOGICIBIN; GLYCOSYLATED (ALC) 83036 \$ 14.18 see footnote *** 14.18 14.18 PROSTATE SPECIFIC ANTIGEN (PSA); COMPLETE OF LORING (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); See Footnote *** 26.85 PROSTATE SPECIFIC ANTIGEN | | 01002 | 7 | 3.00 | Jee Toothote | 3.00 | 5.00 |
| ABUMIN; URINE (EG, MICROALBUMIN), QUANTITATIVE 82043 \$ 8.44 \$ see footnote *** 8.44 8 | • | 81003 | 9 | 3.29 | see footnote *** | 3.29 | 3.29 |
| MICROALBUMIN, QUANTITATIVE 82043 \$ 8.44 8.44 8.44 CALCULUS; INFRARED | | | | | | | |
| CALCULUS; INFRARED SPECTROSCOPY 82365 \$ 18.83 see footnote *** 18.83 18. | ALBUMIN; URINE (EG, | | | | | | |
| SPECTROSCOPY 82365 \$ 18.83 see footnote *** 18.83 18.83 CREATINE 82540 \$ 6.77 see footnote *** 6.77 | MICROALBUMIN), QUANTITATIVE | 82043 | Ç | 8.44 | see footnote *** | 8.44 | 8.44 |
| CREATINE | CALCULUS; INFRARED | | | | | | |
| GASES, BLOOD, ANY COMBINATION OF PH, PCO2, PO2, CO2, HC B2803 S 38.06 See footnote *** 38.06 38.06 Se | | | | | | | |
| OF PH, PCO2, PO2, CO2, HC 82803 \$ 38.06 see footnote *** 38.06 38.06 14.18 14.18 14.18 14.18 14.18 14.18 14.18 PROSTATE SPECIFIC ANTIGEN (PSA); COMPLEXED (DIRECT MEAS 84152 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL 84153 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL 84154 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL 84154 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL 84154 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL SEE FOOTNOTE *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL SEE FOOTNOTE *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL SEE FOOTNOTE *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL SEE FOOTNOTE *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL SEE FOOTNOTE *** 26.85 | CREATINE | 82540 | Ş | 6.77 | see footnote *** | 6.77 | 6.77 |
| OF PH, PCO2, PO2, CO2, HC 82803 \$ 38.06 see footnote *** 38.06 38.06 14.18 14.18 14.18 14.18 14.18 14.18 14.18 PROSTATE SPECIFIC ANTIGEN (PSA); COMPLEXED (DIRECT MEAS 84152 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL 84153 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL 84154 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL 84154 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL 84154 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL See footnote *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL SEE FOOTNOTE *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL SEE FOOTNOTE *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL SEE FOOTNOTE *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL SEE FOOTNOTE *** 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL SEE FOOTNOTE *** 26.85 | CASES BLOOD AND COMBINATION | | | | | | |
| HEMOGLOBIN; GLYCOSYLATED | | 02002 | ے ا | 30.06 | soo footnoto *** | 20.06 | 20.06 |
| A1C 83036 \$ 14.18 see footnote *** 14.18 14.18 14.18 | | 82803 | | 36.00 | see lootilote | 36.00 | 36.00 |
| PROSTATE SPECIFIC ANTIGEN (PSA); COMPLEXED (DIRECT MEAS 84152 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL 84153 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); FREE 84154 \$ 26.85 see footnote *** 26.85 26.85 THYROID STIMULATING HORMONE (TSH) 84443 \$ 24.53 see footnote *** 24.53 24.53 BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC, 85025 \$ 11.34 see footnote *** 11.34 11.34 BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC, 85027 \$ 9.45 see footnote *** 9.45 9.45 PROTHROMBIN TIME; 85610 \$ 6.26 see footnote *** 6.26 6.26 THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLO 85730 \$ 8.77 see footnote *** 86.97 86.97 BLOOD TYPING, SEROLOGIC; ABO 86900 \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) 86901 \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR | • | 83036 | | 14.18 | see footnote *** | 14.18 | 14.18 |
| COMPLEXED (DIRECT MEAS 84152 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL 84153 \$ 26.85 see footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); FREE 84154 \$ 26.85 see footnote *** 26.85 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); FREE 84154 \$ 26.85 see footnote *** 26.85 26.85 26.85 EAS 26.85 See footnote *** 26.85 26.85 26.85 EAS | (NEC) | 03030 | * | 7 11110 | See Toothote | 14.10 | 14.10 |
| PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL 84153 \$ 26.85 \$ see footnote *** PROSTATE SPECIFIC ANTIGEN (PSA); FREE 84154 \$ 26.85 \$ see footnote *** 26.85 26.85 THYROID STIMULATING HORMONE (TSH) 84443 \$ 24.53 \$ see footnote *** 24.53 BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC, 85025 \$ 11.34 \$ see footnote *** 11.34 11.34 BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC, 85027 \$ 9.45 PROTHROMBIN TIME; 85610 \$ 6.26 \$ see footnote *** 6.26 6.26 THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLO 85730 \$ 8.77 \$ see footnote *** 86.97 SERUM TECHNIQUE 86850 \$ 197.33 \$ see footnote *** 86.97 BLOOD TYPING, SEROLOGIC; ABO 86900 \$ 197.33 \$ see footnote *** 5 9.23 \$ 59.23 \$ see footnote *** | PROSTATE SPECIFIC ANTIGEN (PSA); | | | | | | |
| TOTAL 84153 \$ 26.85 see footnote *** 26.85 26.85 PROSTATE SPECIFIC ANTIGEN (PSA); FREE 84154 \$ 26.85 see footnote *** 26.85 26.85 | COMPLEXED (DIRECT MEAS | 84152 | Ş | 26.85 | see footnote *** | 26.85 | 26.85 |
| PROSTATE SPECIFIC ANTIGEN (PSA); 84154 \$ 26.85 26.25 26.25 26.53 26.25 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.45 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 27.53 | PROSTATE SPECIFIC ANTIGEN (PSA); | | | | | | |
| FREE | | 84153 | \$ | 26.85 | see footnote *** | 26.85 | 26.85 |
| THYROID STIMULATING HORMONE (TSH) | ' '' | | | | | | |
| See Footnote See | | 84154 | \$ | 26.85 | see footnote *** | 26.85 | 26.85 |
| BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC, 85025 \$ 11.34 see footnote *** 11.34 11.34 BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC, 85027 \$ 9.45 see footnote *** 9.45 9.45 PROTHROMBIN TIME; 85610 \$ 6.26 see footnote *** 6.26 6.26 THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLO 85730 \$ 8.77 see footnote *** 8.77 8.77 ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE 86850 \$ 86.97 see footnote *** 86.97 86.97 BLOOD TYPING, SEROLOGIC; ABO 86900 \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) 86901 \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR | | 04442 | , ا | 24.52 | | 24.52 | 24.52 |
| AUTOMATED (HGB, HCT, RBC, 85025 \$ 11.34 see footnote *** 11.34 11.34 BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC, 85027 \$ 9.45 see footnote *** 9.45 9.45 PROTHROMBIN TIME; 85610 \$ 6.26 see footnote *** 6.26 6.26 THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLO 85730 \$ 8.77 see footnote *** 8.77 8.77 ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE 86850 \$ 86.97 see footnote *** 86.97 86.97 BLOOD TYPING, SEROLOGIC; ABO 86900 \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) 86901 \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR | (TSH) | 84443 | | 24.53 | see rootnote **** | 24.53 | 24.53 |
| AUTOMATED (HGB, HCT, RBC, 85025 \$ 11.34 see footnote *** 11.34 11.34 BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC, 85027 \$ 9.45 see footnote *** 9.45 9.45 PROTHROMBIN TIME; 85610 \$ 6.26 see footnote *** 6.26 6.26 THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLO 85730 \$ 8.77 see footnote *** 8.77 8.77 ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE 86850 \$ 86.97 see footnote *** 86.97 86.97 BLOOD TYPING, SEROLOGIC; ABO 86900 \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) 86901 \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR | BLOOD COUNT: COMPLETE (CRC) | | | | | | |
| BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC, 85027 \$ 9.45 see footnote *** 9.45 9.45 PROTHROMBIN TIME; 85610 \$ 6.26 see footnote *** 6.26 6.26 THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLO 85730 \$ 8.77 see footnote *** 8.77 8.77 ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE 86850 \$ 86.97 see footnote *** 86.97 86.97 BLOOD TYPING, SEROLOGIC; ABO 86900 \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) 86901 \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR | | 85025 | | 11.34 | see footnote *** | 11.34 | 11.34 |
| AUTOMATED (HGB, HCT, RBC, 85027 \$ 9.45 see footnote *** 9.45 9.45 PROTHROMBIN TIME; 85610 \$ 6.26 see footnote *** 6.26 6.26 THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLO 85730 \$ 8.77 see footnote *** 8.77 8.77 ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE 86850 \$ 86.97 see footnote *** 86.97 86.97 BLOOD TYPING, SEROLOGIC; ABO 86900 \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) 86901 \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR | ACTOMINIES (HGS, HET, NBC, | 03023 | · · · | , 11.54 | See Toothore | 11.51 | 11.51 |
| PROTHROMBIN TIME; 85610 \$ 6.26 see footnote *** 6.26 6.26 THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLO 85730 \$ 8.77 see footnote *** 8.77 8.77 ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE 86850 \$ 86.97 see footnote *** 86.97 86.97 BLOOD TYPING, SEROLOGIC; ABO 86900 \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) 86901 \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR \$ 59.23 59.23 59.23 | BLOOD COUNT; COMPLETE (CBC), | | | | | | |
| PROTHROMBIN TIME; 85610 \$ 6.26 see footnote *** 6.26 6.26 THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLO 85730 \$ 8.77 see footnote *** 8.77 8.77 ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE 86850 \$ 86.97 see footnote *** 86.97 86.97 BLOOD TYPING, SEROLOGIC; ABO 86900 \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) 86901 \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR \$ 59.23 59.23 59.23 | AUTOMATED (HGB, HCT, RBC, | 85027 | Ş | 9.45 | see footnote *** | 9.45 | 9.45 |
| (PTT); PLASMA OR WHOLE BLO 85730 \$ 8.77 see footnote *** 8.77 8.77 ANTIBODY SCREEN, RBC, EACH \$ 86850 \$ 86.97 see footnote *** 86.97 86.97 BLOOD TYPING, SEROLOGIC; ABO \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR \$ 59.23 59.23 59.23 | PROTHROMBIN TIME; | 85610 | | | see footnote *** | 6.26 | 6.26 |
| (PTT); PLASMA OR WHOLE BLO 85730 \$ 8.77 see footnote *** 8.77 8.77 ANTIBODY SCREEN, RBC, EACH \$ 86850 \$ 86.97 see footnote *** 86.97 86.97 BLOOD TYPING, SEROLOGIC; ABO \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR \$ 59.23 59.23 59.23 | | | | | | | |
| ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE 86850 \$ 86.97 See footnote *** 86.97 87 | · | | | | | | |
| SERUM TECHNIQUE 86850 \$ 86.97 see footnote *** 86.97 86.97 BLOOD TYPING, SEROLOGIC; ABO 86900 \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR \$ 59.23 59.23 59.23 | | 85730 | Ş | 8.77 | see footnote *** | 8.77 | 8.77 |
| BLOOD TYPING, SEROLOGIC; ABO \$ 197.33 see footnote *** 197.33 197.33 BLOOD TYPING, SEROLOGIC; RH (D) \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR \$ 59.23 59.23 59.23 | | 00050 | , ا | 00.07 | 000 f11- *** | 00.07 | 00.07 |
| BLOOD TYPING, SEROLOGIC; RH (D) 86901 \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR | SEKUIVI TECHNIQUE | 86850 | | 86.97 | see rootnote *** | 86.97 | 86.97 |
| BLOOD TYPING, SEROLOGIC; RH (D) 86901 \$ 59.23 see footnote *** 59.23 59.23 CONCENTRATION (ANY TYPE), FOR | RI OOD TYPING SEROLOGIC: APO | 86000 | ے | 107 22 | see footnote *** | 107 22 | 107 22 |
| CONCENTRATION (ANY TYPE), FOR | BLOOD ITTING, SEROLOGIC, ABO | 30300 | | , 13/.33 | 366 100111016 | 137.33 | 157.55 |
| CONCENTRATION (ANY TYPE), FOR | BLOOD TYPING. SEROLOGIC: RH (D) | 86901 | 6 | 59.23 | see footnote *** | 59.23 | 59.23 |
| | | | Ť | 55,25 | | 55,120 | 23,23 |
| | INFECTIOUS AGENTS | 87015 | <u> </u> | 9.75 | see footnote *** | 9.75 | 9.75 |

HARBOR-UCLA MEDICAL CENTER

COMMERCIAL PAYOR CONTRACT - COMPREHENSIVE BUNDLED SERVICES BY SERVICE AREA* EFFECTIVE JANUARY 1, 2023 UPDATED AS OF 12/15/2022

| SHOPPABLE OUTPATIENT SERVICES | | ANTHEM BLUE CROSS (Commercial) | | | Maximum Negotiated Rate | Minimum Negotiated Rate | |
|--|-------------------|-----------------------------------|----|----------------------|---------------------------------------|----------------------------|----------------------|
| Medical Services | CPT/HCPCS Code | Note | | Facility** | Professional | Facility** | Facility** |
| CULTURE, BACTERIAL; ANY OTHER | | | | | | | |
| SOURCE EXCEPT URINE, BLOO | 87070 | | \$ | 12.59 | see footnote *** | 12.59 | 12.59 |
| CULTURE, BACTERIAL; | | | | | | | |
| QUANTITATIVE COLONY COUNT, URINE | 87086 | | \$ | 11.78 | see footnote *** | 11.78 | 11.78 |
| CULTURE, FUNGI (MOLD OR YEAST) ISOLATION, WITH PRESUMPT | 87102 | | \$ | 12.28 | see footnote *** | 12.28 | 12.28 |
| CULTURE, TUBERCLE OR OTHER | 07102 | | 7 | 12.20 | See Toothore | 12.20 | 12.20 |
| ACID-FAST BACILLI (EG, TB, A | 87116 | | \$ | 15.77 | see footnote *** | 15.77 | 15.77 |
| SMEAR, PRIMARY SOURCE WITH | | | | | | | |
| INTERPRETATION; GRAM OR GIEM | 87205 | | \$ | 6.23 | see footnote *** | 6.23 | 6.23 |
| SMEAR, PRIMARY SOURCE WITH | 07206 | | | 7.07 | · · · · · · · · · · · · · · · · · · · | 7.07 | 7.07 |
| INTERPRETATION; FLUORESCENT INFECTIOUS AGENT ANTIGEN | 87206 | | \$ | 7.87 | see footnote *** | 7.87 | 7.87 |
| DETECTION BY | | | | | | | |
| IMMUNOFLUORESCENT | 87281 | | \$ | 17.49 | see footnote *** | 17.49 | 17.49 |
| INFECTIOUS AGENT ANTIGEN | 0,202 | | Ψ | 271.15 | 500 100011010 | 277.13 | 277.13 |
| DETECTION BY IMMUNOASSAY | | | | | | | |
| TECHN | 87305 | | \$ | 17.49 | see footnote *** | 17.49 | 17.49 |
| INFECTIOUS AGENT DETECTION BY | | | | | | | |
| NUCLEIC ACID (DNA OR RNA) | 87491 | | \$ | 51.23 | see footnote *** | 51.23 | 51.23 |
| INFECTIOUS AGENT DETECTION BY | | | | | | | |
| NUCLEIC ACID (DNA OR RNA) | 87591 | | \$ | 51.23 | see footnote *** | 51.23 | 51.23 |
| INFECTIOUS AGENT DETECTION BY | | | | | | | |
| NUCLEIC ACID (DNA OR RNA) | 87624 | | \$ | 51.23 | see footnote *** | 51.23 | 51.23 |
| CYTOPATHOLOGY, CERVICAL OR | 00142 | | ۲. | 20.50 | saa faataata *** | 20.50 | 20.50 |
| VAGINAL (ANY REPORTING SYSTE CYTOPATHOLOGY, CERVICAL OR | 88142 | | \$ | 29.58 | see footnote *** | 29.58 | 29.58 |
| VAGINAL (ANY REPORTING SYSTE | 88175 | | \$ | 38.85 | see footnote *** | 38.85 | 38.85 |
| , | | | | | | | |
| CELL COUNT, MISCELLANEOUS BODY | | | | | | | |
| FLUIDS (EG, CEREBROSPINA | 89050 | | \$ | 6.89 | see footnote *** | 6.89 | 6.89 |
| SARS-COV-2 COVID-19 AMP PRB | | | | | | | |
| HIGH THROUGHPUT TECH | U0003 | | \$ | 109.50 | see footnote *** | 109.50 | 109.50 |
| COV-19 AMP PRB HGH THRUPUT | | | | | e | | |
| WITHIN 2 DAYS COLLECT | U0005 | N | \$ | 36.50 | see footnote *** | 36.50 | 36.50 |
| OBSTETRIC BLOOD TEST PANEL OP MEDICINE | 80055 n/a | Not offered | \$ | n/a 1,296.75 | n/a see footnote *** | n/a 1,296.75 | n/a 1,296.75 |
| OP PRIMARY CARE | n/a | | \$ | 1,296.75 | see footnote *** | 1,296.75 | 1,296.75 |
| OP PITUITARY | n/a | | \$ | 1,296.75 | see footnote *** | 1,296.75 | 1,296.75 |
| OP DIABETES | n/a | | \$ | 1,296.75 | see footnote *** | 1,296.75 | 1,296.75 |
| OP DIABETES ENDOCRINOLOGY | n/a | | \$ | 1,296.75 | see footnote *** | 1,296.75 | 1,296.75 |
| OP GASTROENTEROLOGY | n/a | | \$ | 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP GI PULMONARY | n/a | | \$ | 1,296.75 | see footnote *** | 1,296.75 | 1,296.75 |
| OP HEMONC | | | | | | | |
| INFUSION/HEMATOLOGY | n/a | | \$ | 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP ONCOLOGY | n/a | | \$ | 1,706.25 | see footnote *** | 1,706.25 | 1,706.25 |
| OP INFUSION HEMONC | n/a | | \$ | 819.00 | see footnote *** | 819.00 | 819.00 |
| OP HEMATOLOGY HEMONC | n/a | | \$ | 819.00 | see footnote *** | 819.00 | 819.00 |
| OP NEPHROLOGY OP PULMONARY | n/a n/a | | \$ | 1,160.25 1,160.25 | see footnote *** see footnote *** | 1,160.25 1,160.25 | 1,160.25 1,160.25 |
| OP SLEEP STUDY PULMONARY | n/a n/a | | \$ | 2,320.50 | see footnote *** | 2,320.50 | 2,320.50 |
| OP GASTROENTEROLOGY ENDO | n/a | | \$ | 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP GI ENDO PULMONARY | n/a | | \$ | 1,296.75 | see footnote *** | 1,296.75 | 1,296.75 |
| OP SP GASTROENTEROLOGY ENDO | n/a | | \$ | 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP SP-PULMONARY ENDO | n/a | | \$ | 1,160.25 | see footnote *** | 1,160.25 | 1,160.25 |
| OP PALLIATIVE CARE | n/a | | \$ | 1,296.75 | see footnote *** | 1,296.75 | 1,296.75 |
| OP CARDIOLOGY CLINIC | n/a | | \$ | 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |

HARBOR-UCLA MEDICAL CENTER

COMMERCIAL PAYOR CONTRACT - COMPREHENSIVE BUNDLED SERVICES BY SERVICE AREA* **EFFECTIVE JANUARY 1, 2023 UPDATED AS OF 12/15/2022**

| SHOPPABLE OUTPATIENT SERVICES | | | ANTHEM B | LUE CROSS nercial) | Maximum Negotiated Rate | Minimum Negotiated Rate |
|---|--------------------|------|----------------------------|-----------------------------------|----------------------------|----------------------------|
| Medical Services | CPT/HCPCS Code Not | Note | Facility** | Professional | Facility** | Facility** |
| OP DERMATOLOGY | n/a | | \$ 1,296.75 | see footnote *** | 1,296.75 | 1,296.75 |
| OP POSITIVE CARE | n/a | | \$ 1,296.75 | see footnote *** | 1,296.75 | 1,296.75 |
| OP INFECTIOUS DISEASE | n/a | | \$ 1,160.25 | see footnote *** | 1,160.25 | 1,160.25 |
| OP ARTHRITIS MANAGEMENT | n/a | | \$ 2,320.50 | see footnote *** | 2,320.50 | 2,320.50 |
| OP RHEUMATOLOGY | n/a | : | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP SURGERY - AMBULATORY N-24 | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP SURG-COLORECTAL OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP SURGERY - GENERAL OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP SURGERY - VASCULAR OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP SURGERY - ONCOLOGY OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP SURGERY - GENERAL OPD N-24 | n/a | : | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP NEUROSURGERY OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP SURGERY - THORACIC OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP SURGERY - PLASTIC OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP UROLOGY | n/a | | \$ 1,160.25 | see footnote *** | 1,160.25 | 1,160.25 |
| OP SURGERY - TRANSPLANT OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP OTOLARYNGOLOGY | n/a | | \$ 1,160.25 | see footnote *** | 1,160.25 | 1,160.25 |
| OP PATHOLOGY | n/a | | \$ 1,160.25 | see footnote *** | 1,160.25 | 1,160.25 |
| OP OPHTHALMOLOGY | n/a | | \$ 887.25 | see footnote *** | 887.25 | 887.25 |
| OP OPTOMETRY | n/a | | \$ 819.00 | see footnote *** | 819.00 | 819.00 |
| OP ENDOVASCULAR SURG OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP SURGERY - BREAST OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP ORTHOPEDIC | n/a | | \$ 1,160.25 | see footnote *** | 1,160.25 | 1,160.25 |
| OP GERI PRIMARY CARE OP PAIN MANAGEMENT | n/a | | \$ 1,296.75 \$ 1,160.25 | see footnote *** see footnote *** | 1,296.75 1,160.25 | 1,296.75 |
| OP CONTINUITY | n/a n/a | | \$ 1,160.25 | see footnote *** | 955.50 | 1,160.25 955.50 |
| OP MFI OBSTETRICS | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP OCCUPATIONAL THERAPY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PHYSICAL THERAPY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP DIALYSIS | n/a | | \$ 1,296.75 | see footnote *** | 1,296.75 | 1,296.75 |
| OP SURGERY - DENTAL OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP SURGERY-ORAL&MAXILLOFAC | | | , | | | , |
| OPD | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP NEUROLOGY | n/a | . ! | \$ 1,296.75 | see footnote *** | 1,296.75 | 1,296.75 |
| OP OB/GYN CONTINUITY | n/a | : | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP OB/GYN | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP OB/GYN WOMEN'S HEALTH | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS GENETICS | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDIATRICS | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS ACUTE FOLLOW UP | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS ADOLESCENT | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS ALLERGY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS CARDIOLOGY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS CONTINUITY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS CONTINUITY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS CRANIOFACIAL OP PEDS FAILURE TO THRIVE | n/a n/a | | \$ 1,023.75 \$ 1,023.75 | see footnote *** see footnote *** | 1,023.75 1,023.75 | 1,023.75 1,023.75 |
| OP PEDS FAILURE TO THRIVE OP PEDS GASTROENTEROLOGY | n/a n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS IMMUNOLOGY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS INFECTIOUS DISEASE | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS NEPHROLOGY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS NEUROLOGY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS PEDIATRICS | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS PRE OP TESTING | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS RHEUMATOLOGY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS SURGERY - GENERAL | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP PEDS INFUSION | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS HEMATOLOGY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS NEWBORN | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDIATRICS K.I.D.S. | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |

HARBOR-UCLA MEDICAL CENTER

COMMERCIAL PAYOR CONTRACT - COMPREHENSIVE BUNDLED SERVICES BY SERVICE AREA* **EFFECTIVE JANUARY 1, 2023**

UPDATED AS OF 12/15/2022

| SHOPPABLE OUTPATIENT SERVICES | | | BLUE CROSS mercial) | Maximum Negotiated Rate | Minimum Negotiated Rate | |
|-------------------------------|-------------------|------|------------------------|----------------------------|----------------------------|------------|
| Medical Services | CPT/HCPCS Code | Note | Facility** | Professional | Facility** | Facility** |
| OP PEDS DIABETES | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP PEDS ENDOCRINOLOGY | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP DERMATOLOGY INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP ENDOCRINOLOGY INF | n/a | | \$ 1,023.75 | see footnote *** | 1,023.75 | 1,023.75 |
| OP GASTROENTEROLOGY INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP GENETICS INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP INFECTIOUS DISEASE INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP INFUSION/HEMATOLOGY | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP MEDICINE INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP NEPHROLOGY INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP NEUROLOGY INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP ONCOLOGY INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP RHEUMATOLOGY INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP INFUSION INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP HEMATOLOGY INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP OBSTETRICS INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP GYN/ONCOLOGY INF | n/a | | \$ 3,003.00 | see footnote *** | 3,003.00 | 3,003.00 |
| OP LOMITA FAM MED PRIMARY | | | | | | |
| CARE | n/a | | \$ 819.00 | see footnote *** | 819.00 | 819.00 |
| OP LOMITA FAMILY MEDICINE | n/a | | \$ 819.00 | see footnote *** | 819.00 | 819.00 |
| OP ANESTHESIA PRE OP | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP CARDIOLOGY | n/a | | \$ 1,433.25 | | 1,433.25 | 1,433.25 |
| MEDICINE PRE OP | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP NEUROPHYSIOLOGY | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| ONCOLOGY PRE OP | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| PEDIATRICS PRE OP | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP RADIATION ONCOLOGY | n/a | | \$ 819.00 | see footnote *** | 819.00 | 819.00 |
| OP SURGERY - AMBULATORY | n/a | | \$ 3,685.50 | see footnote *** | 3,685.50 | 3,685.50 |
| OP SP-CARDIOLOGY | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP SP-RADIOLOGY/IMAGING | n/a | | \$ 819.00 | see footnote *** | 819.00 | 819.00 |
| HEMATOLGY PRE OP | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |
| OP OB TRIAGE | n/a | | \$ 819.00 | see footnote *** | 819.00 | 819.00 |
| GYN/ONCOLOGY PRE OP | n/a | | \$ 1,433.25 | see footnote *** | 1,433.25 | 1,433.25 |

Footnotes:

^{*} Services presented are commonly provided by Health Services hospitals, excluding services which are not considered "shoppable".

 $[\]ensuremath{^{**}}$ Facility Rates presented are per diem rates unless stated otherwise.

^{***} Outpatient professional services can be found in schedule "Consumer Shoppable Services_Harbor-UCLA Medical Center_Medicare and Commercial Payor Contracts -Shoppable Outpatient Professional Services By Procedure for Anthem Blue Cross".